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Approved for use through 10/31/2002. OMB 0651-0031

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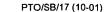
(to be used for all correspondence after initial filing)

**Application Number Filing Date First Named Inventor** Nelson, James E. et al. Group Art Unit **Examiner Name** 

Total Number of Pages in This Submission 33 Attorney Bocket Number 14144						
ENCLOSURES (check all that apply)						
X. Fee Transmittal Form  Fee Attached  Amendment / Reply  After Final  Affidavits/declaration(s)  Extension of Time Request  Express Abandonment Request  Information Disclosure Statement  Certified Copy of Priority Document(s)  Response to Missing Parts/ Incomplete Application  Response to Missing Parts under 37 CFR 1.52 or 1.53		Assignment Papers (for an Application)  X Drawing(s)  Licensing-related Papers  Petition  Petition to Convert to a Provisional Application  X Power of Attorney, Revocation Change of Correspondence Address  Terminal Disclaimer  Request for Refund  CD, Number of CD(s)  Remarks	After Allowance Communication to Group Appeal Communication to Board of Appeals and Interferences Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please identify below): New Specification			
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT						
Firm or Autoliv ASP Individual name						
Signature Sally &		9.Br				
Date 10/4/0		2/				

CERTIFICATE OF MAILING						
	to: Commissioner for Patents, Washington, DC 20231 on this date:					
Typed or printed name	Vickie Harris ,					
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PTO/SB/17 (10-01)
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## **FEE TRANSMITTAL** for FY 2002

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT

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espond to a collection of information unless it displays a valid OMB control number					
Co	omplete if Known				
Application Number					
Filing Date					
First Named Inventor	Nelson, James E. et. al				
Examiner Name					
Group Art Unit					
Attorney Docket No.	14144				

METHOD OF PAYMENT	FEE CALCULATION (continued)			
1. X The Commissioner is hereby authorized to charge indicated fees and credit any overnayments to:	3. ADDITIONAL FEES			
indicated fees and credit any overpayments to:  Deposit	Large Small			
Account Number 500532	Entity Entity Fee Fee Fee Fee Fee Fee Paid			
Deposit	Code (\$) Code (\$)			
Account Autoliv ASP, Inc.	105 130 205 65 Surcharge - late filing fee or oath			
Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17	127 50 227 25 Surcharge - late provisional filing fee or cover sheet			
Applicant claims small entity status.	139 130 139 130 Non-English specification			
See 37 CFR 1.27	147 2,520 147 2,520 For filing a request for ex parte reexamination			
2. Payment Enclosed:	112 920* 112 920* Requesting publication of SIR prior to Examiner action			
Check Credit card Order Other	113 1,840* 113 1,840* Requesting publication of SIR after			
FEE CALCULATION	Examiner action			
1. BASIC FILING FEE	115 110 215 55 Extension for reply within first month			
Large Entity Small Entity	116 400 216 200 Extension for reply within second month			
Fee Fee Fee Fee Description Code (\$) Code (\$) Fee Paid	117 920 217 460 Extension for reply within third month			
101 740 201 370 Utility filing fee 740	118 1,440 218 720 Extension for reply within fourth month			
106 330 206 165 Design filing fee	128 1,960 228 980 Extension for reply within fifth month			
107 510 207 255 Plant filing fee	119 320 219 160 Notice of Appeal			
108 740 208 370 Reissue filing fee	120 320 220 160 Filing a brief in support of an appeal			
114 160 214 80 Provisional filing fee	121 280 221 140 Request for oral hearing			
SUBTOTAL (1) (\$) 740.00	138 1,510 138 1,510 Petition to institute a public use proceeding			
	140 110 240 55 Petition to revive - unavoidable			
2. EXTRA CLAIM FEES	141 1,280 241 640 Petition to revive - unintentional			
Extra Claims below Fee Paid  Total Claims 32 -20** = 12 × 18 = 216	142 1,280 242 640 Utility issue fee (or reissue)			
Total Claims 32 -20** = 12 X 18 = 216 Independent 3 - 3** = X	143 460 243 230 Design issue fee			
Claims Multiple Dependent	177 923 277 010			
Manipo Soponacii				
Large Entity Small Entity	123 50 123 50 Processing fee under 37 CFR 1.17(q)			
Fee Fee Fee Fee Description	126 180 126 180 Submission of Information Disclosure Stmt			
Code (\$) Code (\$)  103 18 203 9 Claims in excess of 20	581 40 581 40 Recording each patent assignment per property (times number of properties)			
102 84 202 42 Independent claims in excess of 3	146 740 246 370 Filling a submission after final rejection (37 CFR § 1.129(a))			
104 280 204 140 Multiple dependent claim, if not paid	149 740 249 370 For each additional invention to be			
109 84 209 42 ** Reissue independent claims over original patent	examined (37 CFR § 1.129(b))			
110 18 210 9 ** Reissue claims in excess of 20 and over original patent	179 740 279 370 Request for Continued Examination (RCE)			
and over original patent	169 900 169 900 Request for expedited examination of a design application			
SUBTOTAL (2) (\$) 216.00	Other fee (specify)			
``	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 40.00			
**or number previously paid, if greater; For Reissues, see above	Actuated by desir ming ree raid SUBTOTAL (3) 147			

SUBMITTED BY Complete (if applicable) Registration No. Telephone Name (Print/Type) Sally J. Brown 37,788 (Attorney/Agent) 625-4934 Signature 0

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